

2019 PROGRAM REGISTRATION FORM

You may register online at www.cityofmonroe.org; stop down to Monroe Parks & Recreation Office or leave in our drop box outside our door after hours.

1. Registering Adult - Contact information for the parent or guardian - TOP PORTION OF FORM

Adult's Last Name: _____ Adult's First Name: _____

Address: _____ City / State / Zip: _____

Home Phone: (608) _____ Mom's Cell: (608) _____ Dad's Cell: (608) _____

Mom's Employer / Day Phone: (608) _____ Dads Employer / Day Phone: (608) _____

Mom's Email: _____ Dad's Email: _____ Relationship: _____

Emergency Name (If no answer at above numbers): _____ Phone: (608) _____

Medical Information: If there are any medical conditions the instructor should be aware of, the participant or a parent of the participant should talk to the instructor at the first class. Please list all allergies such as milk, peanuts, bee stings and others, for we do serve snacks at some programs.

LIST ALLERGIES: _____
 If more than one parental home or other special circumstances, please give name, address and home/work/cell phone below:

2. Fill in programs of each participant (one form per household) T-shirt sizes: YS(6/8), YM(10/12), YL(14/16) Adult S, M, L, XL, XXL

PROGRAM NAME	PARTICIPANT LAST NAME	PARTICIPANT FIRST NAME	M-MALE F-FEMALE	DATE OF BIRTH	GRADE RIGHT NOW	GRADE IN FALL 2019	T-SHIRT SIZE	SCHOOL	FEE

Please use the registration form on page 6 for Baseball & Softball Leagues.
 Please use the registration form on page 6 for the Grade School Sport's Programs.

May we contact you to ask for a donation of food or drink for a special event at the pool or July 4th? YES NO

May we contact you to volunteer on July 4th? YES NO

For program promotion purposes, from time to time photographs may be taken of participants. Those who do not wish to have their photo published must notify the office, state "NO" on this registration form and talk to the instructor. YES NO

Subtotal \$ _____

"Mark up" for recreation: Add \$1 or more to your total fees to help provide assistance for those unable to afford the program fees for recreation activities.

"Mark up" a \$1 or more for scholarship fund for families in need \$ _____

MAKE CHECKS PAYABLE TO: CITY OF MONROE
 A \$35 SERVICE FEE WILL BE ASSESSED TO EACH RETURNED CHECK.

TOTAL AMOUNT \$ _____

Method of Payment Cash _____ Credit cards will only be taken online or in person at Parks & Recreation Office due to security reasons. **No registration should be mailed with credit card information.**
 Credit Card _____ Check# _____

PLEASE KEEP YOUR POOL KEY FOBs FROM LAST YEAR & USE WITH THIS YEAR'S RENEWAL

Authorization to participate and for Emergency Medical Treatment : I hereby register myself/my child to participate in the activity/class above named. In granting permission, I recognize that such activity may be hazardous and injury or accident may occur as a result of direct or in-direct participation. Therefore, I agree to release the City of Monroe, Monroe Parks & Recreation Department, its' employees, agents and volunteer aids from liability as a result of accidents incurred while participating in the activity/class. **Please read and sign the Concussion Information and Waiver. Forms are available at the Parks & Recreation Office or online. Forms required for: Flag Football, Softball, Baseball and Karate. Only one new form needed each year signed by parent & child.**

Participant or Parent/Guardian Signature: _____ Date: _____